A TRUE A DE A PARAMENTA A ANDRES ANDRES ANDRES AND A SECONDARY AND A SECONDARY

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Alexandria, Virgi (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless correspondence and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of puldress)

28880

7590

01/26/2005

WARNER-LAMBERT COMPANY 2800 PLYMOUTH RD ANN APRIOR MAY 230455 10075929

05/12/2005 HDEHESSE 00000033 230455

02 FC:1501 03 FC:1504 1400.00 DA 300.00 DA Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United
States Postal Service with sufficient postage for first class mail in an envelope
addressed to the Mail Stop ISSUE FEE address above, or being facsimile
transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)
(Signature)

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO.

10/075,929 02/13/2002 Loslie Magaus-Miller 5670-D1-01-DRK 9855

TITLE OF INVENTION: ANALGESIC COMPOSITIONS COMPRISING ANTI-EPILEPTIC COMPOUNDS AND METHODS OF USING SAME

					T		
APPLN, TYPE	SMALL ENTITY	12SUE FEE	PUBL	ICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	04/26/2005	
EXAMINER		ART UNIT	CLAS	S-SUBCLASS]		
SPEAR, JAMES M		1615	5	4-310000			
CFR 1.363). Change of correspon Address form PTO/SB/ "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AN	ation (or "Fee Address" Indica or more recent) attached, Us D RESIDENCE DATA TO B	Correspondence or corresponden	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) data will appear on the patent. If an assignce is identified below, the document has been filed for T a substitute for filing an assignment.				
(A) NAME OF ASSIGN	NEE	. (B) RE	SIDENCE: (CITY	and STATE OR CO	UNTRY)	•	
Warner-Lam	bert Company	Mo	rris Plai	ıs, NJ			
Please check the appropriat	e assignee category or catego	ries (will not be printed	on the patent):	Individual AC	orporation or other private gr	oup entity Government	
4n. The following fee(s) and Issue Fee Publication Fee (No Advance Order - # o	small entity discount permitte	ad) Qi	ayment by credit c	ont of the fee(s) is en ard. Form PTO-2038 by authorized by cor 23-045	3 is amached.	credit any overpayment, to copy of this form).	
a. Applicant claims	s (from status indicated above SMALL ENTITY status. Sec	37 CFR 1.27. 🔲 t	. Applicant is no la	nger claiming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and interest as shown by the re-) is requested to apply the Issa Publication Fee (if required) veords of the United States Pat	ie Fee and Publication F will not be accepted from not and Trademark Office to and Trademark Office	ce (if any) or to re- n anyone other than ce.	apply any previous the applicant; a reg	y paid issue fee to the applic istered attorney or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature	Steven R. Ec	7. Zel		Date	Nay 10, 2.		
Typed or printed name	ion is required by 37 CFR 1.3		equired to obtain or			d by the USPTO to process)	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USP10 to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form und/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

OMB 0651-0033

U.S. Parent and Trademark Office; U.S. DEPARTMENT OF COMMERCE